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ABSTRACT

The statement on policy recommendations to the Office of Child Development concerns the response of Head Start programs to Federal legislation requiring that 10 percent of their enrollment be reserved for handicapped children. Formulated by a group of independent consultants to a project which studied the handicapped effort in Head Start, the statement is said to have evolved partly from assessment of research data and partly from the deliberations and analyses of the consultants during the project year. Among the ten major conclusions cited are that handicapped children who are admitted are included in regular Head Start programs; that the moderately and severely handicapped appear to be frequently excluded from such program admission; and that Head Start staffs have positive attitudes toward the handicapped and their rights to developmental opportunities. Improvements recommended include the need for Head Start policies to make clear the intent to include children with severe handicaps, and the need for re-evaluation of the 10 percent requirement. (LS)

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A STATEMENT OF POLICY RECOMMENDATIONS ON THE HANDICAPPED EFFORT IN HEAD START

Prepared and Submitted by:

Division of Special Education and Rehabilitation

Syracuse University

October 31, 1974

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A STATEMENT ON POLICY RECOMMENDATIONS TO

THE OFFICE OF CHILD DEVELOPMENT

Since its inception about a decade ago, our Nation's Head Start efforts embraced a principal mission to serve disadvantaged young children, the objectives of which contained provisions for a broad spectrum of opportunities designed to nurture their physical, social, and intellectual development. Yet, from its beginnings, this great social movement did not appear to accept the idea that Head Start should be directly and vigorously involved in providing services for disadvantaged children with added handicaps. Born of great hopes yet fragile underpinnings, it almost seemed as if it would be enough that Head Start devote itself to the non-specifically handicapped disadvantaged, without the increased burdens and diversions incurred from work on behalf of so-called special children.

However, the 1972 Congress formally rejected whatever vestiges of prejudice toward the handicapped remained among those who are responsible for the implementation of Head Start programs. In its amendments to the Head Start legislation, Congress mandated inclusion of handicapped children, clearly emphasized the needs of the more severely

handicapped, and expected as quickly as possible that at least 10 percent of the enrollment opportunities in Head Start programs be reserved for such children. Studies by our colleagues at Syracuse University and Systems Research Incorporated sought to determine how the challenge of the Congressional mandate was met. This statement on policy recommendations to the Office of Child Development evolved, in part, from the assessment of data obtained during the course of this research and, in equal measure, on our own deliberations and analyses during the project year.

As a group of independent consultants to the Syracuse University-Systems Research Incorporated study of the handicapped effort in Head Start, we submit the following as reasonable conclusions based on our understanding of the data presented to us by the project staff:

1. Inclusion of the handicapped is neither a major problem nor a serious policy question. Essentially, children who are admitted are included in regular Head Start Programs. A more compelling issue concerns the moderately and severely handicapped who appear to be frequently excluded or exempted from such program admission. Another issue, which was not carefully examined but is worthy of serious study, concerns the degree to which included handicapped children are truly integrated.

2. The typical Head Start setting offers sufficient resources and capabilities to include mildly, most moderately, and even some severely impaired children.

3. The typical Head Start center staff believes that inclusion of handicapped with non-handicapped children is beneficial for all children and, in general, staffs have positive attitudes toward the handicapped and their rights to developmental opportunities.

4. The extent of inclusion and integration of the handicapped was greater among those Head Start programs ranked by observers as of high quality.

5. The 10 percent mandate tends to encourage unnecessary "labeling" of children who, formerly, might not have been so designated while, nevertheless, enrolled.

6. Sufficient and appropriate support systems (for example, individualized programming and attention and, externally, renewed and improved relationships with voluntary agencies and the public schools) strengthen and enhance the inclusion and integration of handicapped children, especially the severely handicapped, in Head Start programs.

7. Involvement of handicapped children has increased Head Start's collaborations with community agencies.

8. As contact with them increases, the degree to which Head Start's staffs become receptive to enrolling severely handicapped children increases.

9. The determination of an overall "average" cost of serving the handicapped in Head Start is virtually impossible. However, estimates based on relatively modest data suggest that the cost of serving the mildly handicapped is only slightly more than that for serving the ordinary child in Head Start. Further, although founded on even less firm data, there are suggestions that the cost for serving the more severely handicapped is significantly greater than for the ordinary child. Such programming would probably require two to three times typical expenditures. Therefore, cost projections must always be stated as functions of the extent of the handicap and the specific behavior exhibited by the child, plus the depth and quality of the services provided.

10. Head Start programs do not believe they have the resources and capabilities to serve severely handicapped children. However, they can, with appropriate resources and effort (e.g., additional staff, pertinent consultation, ongoing supervision), develop sufficient capabilities to serve severely as well as mildly handicapped children.

Inevitably, data collection leads to data reduction and hypothetical formulations, which should precede policy development and action. What we have learned from this project now causes us to offer the following recommendations:

1. The Congressional Mandate

It is clear that the Congressional mandate demands attention to so-called "high-risk," especially severely handicapped, populations. Therefore, specific strategies must be built into the total effort to give priority to these groups. Essentially, it is incumbent upon those who develop, as well as those who must eventually implement, policies to strive to guarantee that the language of their guidelines and policies does not lead to the exemption or removal of children from programs. Head Start policies must make clear the intent to include, rather than exclude, children because of the severity of their handicaps.

It is recommended that increased program monitoring be required to even further guarantee the continued inclusion and integration of mildly impaired children in Head Start programs. However, much greater efforts than heretofore must be exerted if significantly more severely disabled children are to be included and integrated--the clients that Congress surely had intended to benefit directly from the

1972 mandate. We believe that the Congressional mandate which relates primarily to the more severely handicapped may not have been met, and special efforts may be required to reduce current roadblocks to the successful implementation of that mandate. Lastly, here, although it was neither within the scope of our responsibilities nor possible in light of our resources to examine policies and practices related to the integration of Head Start participants in general, we are compelled to note this as a critical issue demanding the most deliberate analysis and attention. All children in our Nation deserve the fullest developmental opportunities in the maximally integrated settings that society is capable of providing.

2. Definitions, Labels, and the 10 Percent Requirement

The intent of the 10 percent requirement was to provide Head Start opportunities to moderately and severely handicapped children and, consequently, we question whether the law has fulfilled this expectation. Unfortunately, the wording of the current law appears merely to cause more children to be defined and labeled as handicapped, but not to include more severely handicapped children in Head Start programs. As quickly as practicable, consideration should be

given whether to keep, modify, or remove this requirement for Head Start Programs. However, whatever decision is made, it is of paramount importance to recognize that it was the intent of the Congress, and it should remain the goal of the Office of Child Development and its agencies, to significantly increase the inclusion and integration of moderately and severely handicapped children in Head Start.

3. Developmental Needs of Eligible Children

We believe that there are four important elements of any exemplary program for Head Start handicapped children: inclusion and integration, parent involvement, community agency involvement, and training and technical assistance. The "true" objective is clear, at least to us. Head Start children, handicapped children, all children, deserve opportunities to be as integrated as their needs permit in normalized communities. "Integration" will not provide solutions to all problems, but it is necessary for the solution of the most important problems. Further, before integration can be achieved, inclusion must be guaranteed.

Similarly, parents must be involved, not only in token ways, not even merely in advisory capacities, but as participants in policy development and implementation. It

is not that parents are more worldly, or wise, or trustworthy than the professionals; they have different agendas, and needs, and aspirations and, therefore, must be listened to. So, too, must other community agencies. It is a non sequitur to think of "integration" and "mainstreaming" and not give deliberate attention to one's neighbors. Is it not possible that the United Cerebral Palsy Agency, or the Association for Retarded Children, or the Mental Health Association, or the Boys Club, or the YMCA, can and should provide support for the Head Start mission?

Lastly, here, observers noted that a fair number of Head Start staff members expressed a desire for more effective consultation and in-service training. They have a need to talk, to have someone listen seriously and single-mindedly to them, to have someone be devoted to helping them. If staffs are to grow in motivation and skill, more appropriate help and different ways for organizing and delivering these support systems will be required.

4. Design of a Cost Accounting Program

A cost accounting procedure should be designed and implemented in a representative sample of Head Start agencies, to provide eventually data on direct and indirect costs.

Agencies selected for this involvement should be allocated sufficient funds with which to engage properly in such activity. Data generated from this research should lead to the development of cost accounting guidelines and a schedule for special funding to any Head Start agency that justifies and documents the delivery of special services for the handicapped.

5. Implementation of Program-Related Monitoring Expenditure "Banks"

In the distribution of funds, special or additional support for the handicapped should be based on appropriate services rendered rather than on percentages or numbers of identified children enrolled. As noted in Recommendation 2, such enrollment quotas appear to lead to a labeling process rather than to guaranteed appropriate services. Attachment of extra funds for each handicapped child further increases the tendency to do little more than label children. On the other hand, assignment of funds to special services delivered and sheer hours of program inclusion offer greater probability for focusing emphasis on the special needs of the child.

Mechanisms should be required whereby an agency might draw upon an account, to a certain established maximum, to provide services in accordance with determined need.

General guidelines regarding the inclusion of severely and moderately handicapped children, permissible services, and range of expected costs would enable the agency to draw the funds, deliver services, and document expenditures, better assuring than previously that program quality, agency intent, and fiscal audit confirm the appropriateness of expenditures. Established maximums for special expenditures would be applied to an agency as a whole, rather than to the individual child, and would be based on total enrollment, using the percentage of a total enrollment which could be anticipated as needing services, and the maximum anticipated value of such services. Thus, while a generous ceiling on services for any one child would be operative, these would be subject to audit and, moreover, control over imprudent expenditures on an agency-wide basis would be exercised by a formula based on maximum allowance.

The amount of supplemental appropriation should be determined by expectations that approximately three or four percent of otherwise eligible children will be sufficiently severely handicapped to require special services. In documented situations, agencies may be approved to receive support for serving an increased percentage of severely handicapped eligible children. However, to better insure genuine

integration, as well as program inclusion, such increases should be very selective, reasonably determined, and modestly applied. To continue, special services cause the total cost for severely handicapped children to be from two to three times the cost for other, non-handicapped children. However, it should be noted that such services may significantly benefit the non-handicapped. Lastly, while it would not be expected that every agency will fully utilize funds potentially available through a supplemental appropriation, the "bank" would be provided from which agencies could draw to deliver the services when and wherever the need is demonstrated.

What is the future for Head Start? Is it a harbinger for universal early education? Is it an enunciation of public involvement in preschool education? Is it a "stalking horse," a front runner, for what the public wants--or for what some people think it needs? Should it be held accountable to the local public, to state and national agencies? And, if it should be, how? The Office of Child Development, and its Head Start programs, has provided answers to some of these questions. Such answers may be clear to those who will analyze the data--or accept the data reductions. The Head Start movement has

demonstrated that young children profit mightily from inclusion in programs designed to facilitate their development. Legally, the severely handicapped are no less eligible; morally, the severely handicapped are no less worthy; and, conclusions from the data indicate that the severely handicapped would profit equally from participation in Head Start. The current period will be the watershed for Head Start leadership in educating the handicapped, or it can begin a new era of concern and accomplishment.

Although Congress may not have been in error in requiring a 10 percent mandate, workable guidelines have yet to be developed to insure the inclusion and integration of moderately and severely handicapped children. Without such guidelines, the 10 percent mandate is of dubious success. While the fact that the major intent of the current mandate was to provide greater participation of the more severely handicapped, heretofore not achieved, we urge that the principle of full participation of the handicapped continue to be a central goal, although requiring new strategies and energies to adequately implement. In essence, all eligible handicapped children deserve

to be included in Head Start programs and every effort should be made to guarantee their participation.

Respectfully submitted,

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